

PATENT  
Docket No. 290252023100

# DECLARATION FOR UTILITY PATENT APPLICATION

AS A BELOW-NAMED INVENTOR, I HEREBY DECLARE THAT:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: LIQUID BASED VASO-OCCLUSIVE AGENTS, the specification of which is attached hereto unless the following box is checked:

- ☐ was filed on as United States Application Serial No. or PCT International Application No. Unknown and was amended on (if applicable).

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE-IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS, AS AMENDED BY ANY AMENDMENT REFERRED TO ABOVE.

I acknowledge the duty to disclose information which is material to the patentability as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed:

Application No.	Country	Date of Filing	Priority Claimed
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

Application Serial No.	Filing Date

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

Application/Serial No.	Filing Date	Status
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

18 JUNE 99  
Date

*Robert M. Abrams*  
Name: Robert M. ABRAMS  
Residence: Sunnyvale, California  
Citizenship: U.S.A.  
Post Office Address: 359 Redondo Terrace, Sunnyvale, CA 94086

18 June 99  
Date

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Date

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Date

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Date

*Michael P. WALLACE*  
Name: Michael P. WALLACE  
Residence: Pleasanton, California  
Citizenship: U.S.A.  
Post Office Address: 3515 D Bernal Avenue, Pleasanton, CA 94566

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DECLARATION FOR UTILITY PATENT APPLICATION

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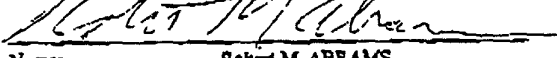
			<input type="checkbox"/> Yes <input type="checkbox"/> No


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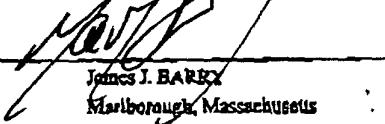

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Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned <input type="checkbox"/>		
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13 June 99   
Date Name: Robert M. ABRAMS  
Residence: Sunnyvale, California  
Citizenship: U.S.A.  
Post Office Address: 359 Redondo Terrace, Sunnyvale, CA 94086

18 June 99   
Date Name: Paul C. SLAIKEU  
Residence: Hayward, California  
Citizenship: U.S.A.  
Post Office Address: 3594 Skyline Drive, Hayward, CA 94542

8/1/99   
Date Name: James J. BARRY  
Residence: Marlborough, Massachusetts  
Citizenship: U.S.A.  
Post Office Address: 35 Jackson Circle, Marlborough, MA 01752

6/18/99   
Date Name: Joseph C. EDER  
Residence: Los Altos Hills, California  
Citizenship: U.S.A.  
Post Office Address: 23423 Toyonta Road, Los Altos Hills, CA 94024

6/22/99   
Date Name: Michael P. WALLACE  
Residence: Pleasanton, California  
Citizenship: U.S.A.  
Post Office Address: 3515 D Bernal Avenue, Pleasanton, CA 94566

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Application of:

**Robert M. Abrams, et al.**

**Serial No.: 09/351,769**

**Filed: July 12, 1999**

**For: LIQUID BASED VASO-  
OCCLUSIVE COMPOSITIONS**

) **Group Art Unit: 1632**

) **Examiner: R. Shukla**

Commissioner For Patents  
Washington, D.C. 20231

**POWER OF ATTORNEY (REVOCATION OF PRIOR POWERS)  
AND CERTIFICATE UNDER 37 C.F.R. § 3.73(b)**

As assignee of record of the entire interest of the above identified application, the undersigned hereby revokes all powers of attorney previously given in the above-identified application and hereby appoints all the registered practitioners identified by Customer Number 22249 to prosecute and transact all business in the Patent and Trademark Office connected therewith.



**22249**

PATENT TRADEMARK OFFICE

LYON & LYON LLP  
Suite 4700  
633 W. Fifth Street  
Los Angeles, CA 90071  
(213) 489-1600

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**Attorney of Record**

Please mail all correspondence to Lyon & Lyon, attention David T. Burse, 633 West Fifth Street, Suite 4700, Los Angeles, California 90071 and direct all telephone calls to David T. Burse at (408) 993-1555.

**Certificate**

Assignee, SCIMED Life Systems, Inc., having a place of business at One Scimed Place, Maple Grove, Minnesota 55311-1566, certifies that it is the assignee of the entire right, title and interest in the patent application identified above by virtue of a chain of title from the inventors of the subject matter disclosed and claimed. The assignment from Robert M. Abrams, Paul C. Slaikeu, James J. Barry, Joseph C. Eder, and Michael P. Wallace to SCIMED Life Systems, Inc. is recorded at Reel 010401, Frame 0345.

The undersigned has reviewed all the documents in the chain of title of the patent application identified above and, to the best of undersigned's knowledge and belief, title is in the assignee identified above.

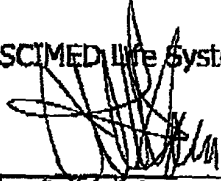
The undersigned is empowered to sign this Revocation and Power of Attorney and Certificate on behalf of the assignee.

269/106  
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SCIMED Life Systems, Inc.

Dated: 1/2/02

By:   
Albert E. Kau  
Assistant Secretary